FOR INSTRUCTIONS, SEE BACK OF FORM CHECK ONE: This is an initial* Statement of Organization This is an amended* Statement of Organization An initial Statement of Organization must be filed Willing Organization An initial Statement of Organization must be filed Willing Organization a change expenditures, or incurring indebtedness exceeding \$750. Amenda a change. Penalties may be imposed for late-filed Statements of Organization committee that exceeds \$750 in activity for another office shall file within the DR-1 disclosing information concerning the campaign for the new office statements. COMMITTEE NAME	ments must be filed within 30 days of ation. A candidate with an open 10 days either a new or amended cought.
Ron Tordoff	
IMPORTANT: Indicate type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Statewide PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue(including committee involved in multiple city/county ballot issues)	
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mandatory except for a candidate's committee)
Name + Ron Tordoff	Name + Ron Tordoff
Mailing Address & American Address & American Address & American A	Mailing Address \$ \$ \$ Po Box 212 117 circle Orive City, State \$ \$ Zip Code \$ \$ \$ Wellsburg Towa 50680 Phone (641) 869-3683
INDICATE PURPOSE OF COMMITTEE - Check One Box X Ac Comment or description: All Candidates Enter:	e-Mail
Office Sought: Sheriff	1
Political Party (if applicable) Non-party Independent District: Year Standing for Election: 2008	County: <u>Grandy (38)</u> (If active in multiple ballot issue elections, attach list of counties Date of Election: <u>Nev. 4th 2008</u>
Bank Account Name Roy Tordoff R T Tordoff	Candidate name & Address or Parent Entity (PACs, if applicable),
Name of Financial Institution/type of Account	Affiliate, or Sponsor Ron Tordoff Mailing Address + + Po Box 212 117 Circle Drive
Name of Financial Institution/type of Account ++ Hardin County Savings Bank Mailing Address + +	Affiliate, or Sponsor Ron Tordoff Mailing Address $\downarrow \downarrow$ Po Box 212 117 Circle Drive City $\downarrow \downarrow$ State $\downarrow \downarrow$ Zip $\downarrow \downarrow$
Name of Financial Institution/type of Account	Affiliate, or Sponsor Ron Tordoff Mailing Address + + Po Box 212 117 Circle Drive
Bank Account Name Ron Tordoff B.J. Tordoff III Campaign expenses paid from personal funds' Name of Financial Institution/type of Account Hardin County Savings Bank Mailling Address L202 Edgington Avenue City State Zip Eldora Town 50627	Affiliate, or Sponsor Ron Tordoff Mailing Address PO BOX 212 117 Circle Drive City State Towa 50680 Phone (641) 869-3683 e-Mail
Bank Account Name Ran Tordoff B. J. Tordoff III Campaign expenses paid from personal funds' Name of Financial Institution/type of Account Hardin County Savings Bank Mailing Address 1202 Edgington Avenue City	Affiliate, or Sponsor Ron Tordoff Mailing Address FO BOX 212 117 Circle Drive City State Towa 50680 Phone (441) 869-3683 e-Mail Firms the following:
Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address Lao2 Edgington Avenue City State Eldora Town 50627 STATEMENT OF AFFIRMATION: By filing this document the committee at 1. The committee and all persons connected with the committee understand the rules in Chapter 351 of the lowa Administrative Code.	Affiliate, or Sponsor Ron Tordoff Mailing Address FO BOX 212 117 Circle Drive City State Tip Wellsburg Towa 50680 Phone (641) 869 - 3683 e-Mail e-Mail firms the following: nat they are subject to the laws in lowa Code chapters 68A and 68B and the administrative
Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address Lao2 Edgington Avenue City State Eldora Town 50627 STATEMENT OF AFFIRMATION: By filing this document the committee at 1. The committee and all persons connected with the committee understand the rules in Chapter 351 of the Iowa Administrative Code. 2. That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disciples.	Affiliate, or Sponsor Ron Tordoff Mailing Address FO BOX 212 117 Circle Drive City State Towa 50680 Phone (441) 869-3683 e-Mail Firms the following:
Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address State State Town State Town State Town State Town State Town State Town State Town State Town State Town State	Affiliate, or Sponsor Roy Tordoff Mailing Address PO BOX 212 117 Circle Drive City
Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address Lao2 Edgington Avenue City	Affiliate, or Sponsor Roy Tordoff Mailing Address PO BOX 212 117 Circle Drive City
Name of Financial Institution/type of Account Hardin County Savings Bank Mailing Address Light State Zip Eldona Toward Toward State Zip Toward Toward Toward Toward STATEMENT OF AFFIRMATION: By filing this document the committee at 1. The committee and all persons connected with the committee understand the rules in Chapter 351 of the lowa Administrative Code. 2. That lowa Code section 68A.402 and rule 351—4.9 require the filing of discission of other criminal and civil sanctions. 3. That lowa Code section 68A.405 and rules 351—4.38 through 4.43 require materials except for those items exempted by statute or rule. A committee that does not intend to cross the \$750 filing threshold shall file the Form DR-SFA for 4. That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit issue PACs.	Affiliate, or Sponsor Roy Tordoff Mailing Address PO BOX 212 117 Circle Drive City
Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address Laca Edgington Avenue City State J Zip J Eldona STATEMENT OF AFFIRMATION: By filing this document the committee at 1. The committee and all persons connected with the committee understand the rules in Chapter 351 of the lowa Administrative Code. 2. That lowa Code section 68A.402 and rule 351—4.9 require the filing of discissiblects the candidate or chairperson (in the case of committees other than a composition of other criminal and civil sanctions. 3. That lowa Code section 68A.405 and rules 351—4.38 through 4.43 require materials except for those items exempted by statute or rule. A committee that does not intend to cross the \$750 filing threshold shall file the Form DR-SFA for 4. That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit issue PACs. 5. A candidate and a candidate's committee may only expend campaign funds	Ron Tordoff Mailing Address PO BOX 212 117 Circle Drive City + State + Zip + Wellsburg
Name of Financial Institution/type of Account Hardin County Squirys Bank Mailing Address Laca Edgington Auchue City State Jap Jap STATEMENT OF AFFIRMATION: By filing this document the committee at 1. The committee and all persons connected with the committee understand the rules in Chapter 351 of the lowa Administrative Code. 2. That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclusibjects the candidate or chairperson (in the case of committees other than a composition of other criminal and civil sanctions. 3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require materials except for those items exempted by statute or rule. A committee that does not intend to cross the \$750 filing threshold shall file the Form DR-SFA for 4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit issue PACs. 5. A candidate and a candidate's committee may only expend campaign funds 6. That the committee will continue to file disclosure reports until all activity has 6. That the committee will continue to file disclosure reports until all activity has 6.	Affiliate, or Sponsor Row Tordoff Mailing Address Po Box 212 117 Circle Orive City